




County of Los Angeles CHIEF EXECUTIVE OFFICE

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WILLIAM T FUJIOKA
Chief Executive Officer

December 20, 2011

To: Supervisor Zev Yaroslavsky, Chairman
Supervisor Gloria Molina
Supervisor Mark Ridley-Thomas
Supervisor Don Knabe
Supervisor Michael D. Antonovich

From: William T Fujioka
Chief Executive Officer 

Andrea Sheridan Ordin 
County Counsel

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JOINT REPORT OF THE CHIEF EXECUTIVE OFFICE COUNTY RISK MANAGER AND COUNTY COUNSEL LITIGATION COST MANAGER REGARDING ACCOMPLISHMENTS OF FISCAL YEAR 2010-11

Pursuant to an October 16, 2007 motion by Supervisor Molina, your Board instructed the Chief Executive Officer's (CEO) County Risk Manager and County Counsel's Litigation Cost Manager to prepare a joint report identifying specific accomplishments during Fiscal Year (FY) 2007-08, that supported the efforts of risk management and reduction of the County of Los Angeles' (County) exposure to litigation. Pursuant to the motion, the report is also to identify joint goals and objectives for subsequent fiscal years. As noted on our November 9, 2010 report to your Board, the goals and objectives portion of subsequent reports was separated from this report to be submitted in the Spring. The *Joint Report of Risk Management Goals and Objectives – Fiscal Year 2011-12*, was issued to your Board on July 8, 2011.

In addition, on November 5, 2008, on a motion by Supervisor Molina, and as amended by Supervisor Antonovich, your Board directed the CEO, County Counsel, County Risk Manager, and other Department Heads, as appropriate, to create a Legal Exposure Reduction Committee (Committee) that shall meet quarterly; establish an annual Countywide and departmental legal exposure reduction goal; create proactive County Counsel procedures to advise departments on various methods to reduce legal cost; create procedures to discuss areas of potential exposure, develop and implement specific strategies calculated to prevent future claims and lawsuits; provide updated training on new changes in laws and policies for each appropriate department to implement; assess the efficacy of corrective action plans; review management training and implementation of County policies; review lessons learned; discuss areas of potential exposure; develop and implement specific strategies calculated to prevent future claims and lawsuits; and report annually on their progress and efforts. The Committee's current roster is attached for your reference (Attachment II).

"To Enrich Lives Through Effective And Caring Service"

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The report attached (Attachment I) responds to both of these directives since the Committee's activities represent one of the joint efforts between the CEO and County Counsel. Identified in the report are joint accomplishments of FY2010-11, which demonstrate the continuing, collaborative efforts of the CEO and County Counsel to manage the County's risks and reduce its litigation exposure.

For additional information, your staff may contact Laurie Milhiser, County Risk Manager, at (213) 351-5346, or Steven H. Estabrook, Litigation Cost Manager, at (213) 974-1762.

If you have any questions, please have your staff contact Ellen Sandt at (213) 974-1186 or esandt@ceo.lacounty.gov.

WTF:EFS:ASO
LM:SEN:SHE:sg

Attachments

c: All Department Heads

**JOINT REPORT
CHIEF EXECUTIVE OFFICE COUNTY RISK MANAGER AND
COUNTY COUNSEL LITIGATION COST MANAGER
REGARDING ACCOMPLISHMENTS OF FISCAL YEAR 2010-11**

Legal Exposure Reduction Committee

The Legal Exposure Reduction Committee (LERC) consists of two co-chairs, the County of Los Angeles (County) Risk Manager and Litigation Cost Manager. All County departments are now represented on the main committee or one of the several sub-committees.

LERC has taken the following actions:

Meet Quarterly

Although directed by the motion to meet quarterly, LERC has met nine times during the last year in order to advance the goals of the committee. The various sub-committees have also met regularly and reported on their efforts at the LERC meetings.

Establish a Countywide and Departmental Legal Exposure Reduction Goal

In 2009, LERC members agreed to the following goal:

By June 30, 2011, reduce by five percent, Countywide indemnity and legal costs associated with the County of Los Angeles' claims and litigation, including workers' compensation and tort claims. Departmental risk exposure reduction goals will be specific to each department and may include cost reductions or other aspects of risk management. The five percent cost reduction goal shall be established based upon the average annual costs of each category over the last three Fiscal Years (2006-07, 2007-08, 2008-09).

Despite the efforts of LERC and the departments, this goal was not achieved. The goal of LERC is now to support the risk management initiatives included in the County's Strategic Plan. Three priorities were established addressing significant areas of risk, including workers' compensation cost reduction, vehicle usage and liability, and employment practices. LERC has established sub-committees to focus efforts on each of these subjects. Although the sub-committees are chaired by departmental representatives, the Chief Executive Office (CEO) Risk Management Branch provides administrative and technical support for each sub-committee, except for the Employment Practices Liability sub-committee which is supported solely by County Counsel.

Create Proactive County Counsel Procedures to Advise Departments on Various Methods to Reduce Legal Cost

- **Alternative Fee Arrangement.** In an effort to reduce litigation costs, a variety of alternative fee arrangements are being considered in certain low exposure litigated matters in the areas of civil rights and automobile liability. Data relative to the type, severity, average length, and fee ranges for a sample of cases in these particular categories has been collected in order to develop the most feasible alternative fee arrangement. To be effective, any such arrangement must be viewed as practical and financially sound by Contract Counsel. Pilot programs specific to each category are being developed and should be implemented by June 2012.

- **Employee Complaint Investigation Process.** Last year, County Counsel implemented a pilot program aimed at reducing the number of employment-related lawsuits filed against the County. Under that program, a County Counsel attorney was immediately assigned to any employment *claim* received by the Executive Office of the Board of Supervisors and worked closely with the affected department's risk management coordinator in a joint effort to resolve the issues presented in the claim and to avoid future litigation. County Counsel has now identified those departments most adversely affected by employment litigation and is working with their personnel departments and risk management coordinators to provide assistance at an even earlier stage – when the employee files a *complaint* with the department. This early intervention is designed to respond to employee concerns, alert the department of potential liability issues, and, if possible, avoid a subsequent claim and the litigation process. These efforts also include providing legal assistance at the complaint stage to the department through the newly implemented County Equity Oversight Panel (CEOP) process.
- **Medical Expert Review.** County Counsel is conducting a thorough review of the medical experts who currently provide support to the attorneys and Third Party Administrators (TPAs) handling workers' compensation matters. Assembling a highly qualified and responsive team of medical experts is key to a thorough and fair-minded evaluation of workers' compensation applications. The costs associated with Workers' Compensation claims have been steadily increasing and account for the vast majority of Countywide risk management costs. The purpose of the medical expert review is to ensure that both legal staff and Third-Party Administrators are utilizing the most knowledgeable and skilled medical examiners in order to properly evaluate claims and control costs.
- **Legislative Strategies.** County Counsel, in conjunction with representatives of the CEO Legislative Unit and the Department of Public Works Risk Management Group, are examining various legislative strategies to address the recent erosion through case authority of statutory protections afforded public entities. These protections include design immunity, joint and several liabilities, and the ability to pay judgments through installment payments. The legislative strategies include drafting proposed legislation, revising jury instructions, and building a statewide coalition comprised of cities and counties to address the preservation of these protections. These efforts will also include the preparation of draft legislation, reducing the current statutory interest rate governing judgments against public entities.
- **Third Party Administrators Statement of Work.** County Counsel and CEO have conducted ongoing discussions regarding the utilization of TPAs in both the claim and litigation phases. The various divisions within County Counsel which employ the assistance of the TPAs (Carl Warren & Company and Sedgwick Claims Management Services, Inc.) have engaged in a review of the services required for litigation management, with an eye toward eliminating redundancy and reducing costs. The requirements under consideration include the number of cases managed, the level of participation in the administration of the lawsuits, and reporting specifications. The principle aim of the review is to specifically identify those litigation management services required by each division and to incorporate these requirements into a Statement of Work. Because the contracts governing the TPAs pre-date current County Counsel litigation management procedures, the purpose of the review is to better align County Counsel's litigation management needs with the services provided by the TPAs and, thereby, eliminate unnecessary expenses and redundancies. The revised Statement of Work will be used to re-solicit for General Liability TPA services and re-negotiate the continuing medical malpractice TPA contract over the next six months.

- **LERC Presentations.** County Counsel staff has made periodic presentations at LERC meetings addressing recent trial results, significant settlements, and appeals. Most have Countywide implications. The presentations are designed to prompt discussions regarding lessons learned and the appropriate mechanisms to avoid similar liabilities. Department Heads and/or their designees are also provided with financial data which is designed to highlight expenses in particular areas of concern, including employment, automobile, and dangerous condition litigation.

Create Procedures to Discuss Areas of Potential Exposure, and Develop and Implement Specific Strategies Calculated to Prevent Future Claims and Lawsuits

The primary methods developed to discuss areas of potential exposure include LERC and its sub-committees, annual departmental Risk Exposure Cost Avoidance Plans (RECAPs), and annual Department Head Management Appraisal and Performance Plan (MAPP) goals to decrease risk in departments.

Countywide Corrective Action Plan documents have been initiated. These are an extension of department-specific Corrective Action Plans that address claims and exposures with Countywide impact, and provide specific guidance to all departments on identifying and preventing similar claims and exposures in the respective departments.

A LERC Training and Communication sub-committee has been established to evaluate the current training offerings and communication channels, and content that can support LERC-related objectives.

In collaboration with the Department of Human Resources (DHR), CEO is assisting in the implementation of a web-based Countywide leave and absence management system (LeaveLink System). This automated system will enhance leave administration, compliance, documentation, tracking, and reporting capabilities. Implementation of this program is scheduled for early 2012.

LERC expanded its focus in FY2010-11 to include representation from all departments. Specific activities to be accomplished by LERC are handled through the sub-committees. Some of the items discussed throughout the year included:

- Program management updates or considerations for County Counsel and CEO, including upgrades to the Risk Management Information System, selection of a new electronic billing system, consideration of changes to the claim intake process, development of corrective actions for all claims, distribution of claim expense and frequency data to department contacts, methods of communicating with departments, development of a pharmacy benefit network for workers' compensation claims, and the role of the TPAs in the claim and litigation process;
- The County Counsel quarterly litigation report;
- A review of the top paid judgments and settlements;
- Development of goals and objectives for FY2011-12;
- Corrective Action Plans and Summary Corrective Action Plans;

- Risk Exposure Cost Avoidance Plans submitted by each department; and
- Announcements about various training opportunities, including training for risk management coordinators, safety officers, and return-to-work coordinators.

The LERC sub-committee status reports follow:

WORKERS' COMPENSATION AND RETURN-TO-WORK

The Workers' Compensation and Return-to-Work sub-committee was established to evaluate and recommend measures and mechanisms that would facilitate the minimization of liability from a cost-reduction and loss-control perspective, in addition to assessing for best practices at furthering the prevention of workers' compensation claims and returning employees to work as expeditiously as legally possible. Parameters utilized in order of importance are: 1) mandatory requirements, 2) best practices, and 3) good ideas.

The concept of the first recommendation occurred at the sub-committee's first meeting held in April 2011, where discussion of the liability, both current and potential, of rehiring permanent and stationary employees (due to industrial injuries/illnesses) into other County departments/positions led to the realization that there was no current Countywide identifier for former employees. A recommendation was made to establish a procedure that assures and safeguards against such scenarios during the County's (whether at DHR or departmental level) initial examination process and the post-conditional offer process (live scan).

Currently, the sub-committee is completing the list of identifying triggers for scrutiny, such as compromise and release with a resignation letter, do not rehire, etc., as they await the launching of the Absence Management System in the first quarter of 2012, which will be the vehicle to drive this.

Future plans for the sub-committee include:

- The utilization of Civil Service Rule (CSR) 16.02 and 16.04 as a way to un-encumber applicable positions;
- The utilization of CSR 5.12.020 for unauthorized leave of absences;
- Best practices for the Countywide utilization of "Schedule A time" (eight-hour day, Monday through Friday);
- Creation of a Countywide "injured workers" bank to perform temporary light duty;
- The art of disciplining performance issues versus disability issues; and
- Non-adversarial initial contact (postcard/letter) to injured employees at the beginning of leave of absence, explaining the process and inviting them to seek County assistance as needed (may be viewed/argued as first invitation to the interactive process).

VEHICLE LIABILITY

The Vehicle Liability sub-committee was established in April 2011, with the intended purpose of developing and implementing County enterprise risk, and frequency and severity mitigation initiatives to address first- and third-party vehicle liability, employee safety, and standardized vehicle loss control management systems. In order to accomplish its purpose, the sub-committee adopted several values, including placing the safety of our employees first; empowering employees to act in a safe, compliant, and defensive manner while operating vehicles on behalf of the County; and leveraging motor vehicle safety best practices across the County, and collaborating with internal stakeholders in identifying risk mitigation strategies.

The sub-committee determined that efforts to control vehicle liability-related costs vary greatly between County departments; therefore, it focused its efforts on evaluating current department practices and policies as related to controlling vehicle liability in order to establish best practices and develop policies, procedures, and guidelines for Countywide implementation. These efforts have included, but are not limited to:

- Survey of departmental “How Am I Driving?” programs as submitted to the CEO;
- Development of a disciplinary action policy for preventable accidents (currently being reviewed by DHR);
- Evaluation of Countywide implementation of the Department of Motor Vehicles Employer Pull Notice Program to non-mandated drivers; and
- Mandating defensive driver training for all employees operating vehicles for County-related business.

EMPLOYMENT PRACTICES LIABILITY

The Employment Practices Liability sub-committee is chaired by County Counsel and comprised of representatives of several County departments, including CEO, DHR, Public Social Services, Sheriff, Health Services, Fire, Mental Health, and Probation. The sub-committee has three strike teams that are focused on following the implementation and impact of the new County Equity Oversight Panel (CEOP) process, reviewing discrimination, retaliation, and harassment cases to identify “lessons learned” and ways to minimize legal exposure, and continued reviewing of compliance with the Fair Labor Standards Act in various County departments. The strike teams work independently and report their progress to the sub-committee at regularly scheduled meetings to allow for an exchange of information and full participation by the sub-committee members to guide the activities to further advance its goals. Activities that have been completed or are in process include:

- Involved with the establishment of CEOP;
- Coordinated Countywide training on wage and hour issues;
- Evaluating departmental overtime policies to identify problematic issues;
- Exploring legislation as a possible means of reducing County exposure;
- Developing a periodic bulletin to communicate lessons learned; and
- Reviewing the process of issuing discipline letters to unclassified employees.

CLASSIFICATION STUDIES

The Classification Studies sub-committee was established to evaluate the departmental structures for risk management, safety, return-to-work, and claims management functions, and classification levels for staff performing these functions. In March 2011, the sub-committee was expanded to include representatives from many line departments with the goal to study departmental structures and develop staffing models for different types of departments. There could be models for small, medium, and large departments, like-type departments, or some other model. The sub-committee evaluated past classification studies and potential methods of grouping departments, including by function, budget, number of employees, and claim frequency, and/or expense.

The sub-committee determined there are considerable differences between departments regarding their approach to risk management functions and, as a result, it developed a *Survey of Risk Management-Related Tasks by Assigned Parties in the Department*. This survey was distributed to each department in October 2011, and the results will be used to help the sub-committee understand how the risk management functions are handled in each department. The survey results, combined with departmental organizational charts, will be used to develop recommendations for departmental risk management structures. No single structure is appropriate for all departments; the intention of this sub-committee is to provide options for consideration.

MEDICAL MALPRACTICE (HOSPITALS)

The Medical Malpractice (Hospitals) sub-committee was developed to evaluate the underlying root causes of significant medical events and develop methods to reduce the risk of these events. Activities are directed towards system-wide, evidence-based practices which have the potential to improve the quality of care provided and reduce the opportunity for adverse events. Current activities either underway or planned include:

- Mandated system-wide training for fetal heart rate monitoring tied to physician credentialing;
- Resident Supervision audits with facility-specific actions;
- Standardized consents for invasive procedures;
- Identification and implementation of "Best Practices" in the Intensive Care Unit, Emergency, Anesthesia, Infection Prevention, and Medication care areas;
- California Hospital Assessment and Reporting Taskforce (CHART) quarterly pressure ulcer prevalence audits;
- Implementation of centralized infection prevention tracking, reporting, and analysis software;
- Development of system-wide policy for treatment of bed bugs;
- Targeted infection prevention efforts in the areas of central line and surgical-related infections;
- Implementation of quality improvement measures in the areas of acute myocardial infarction, congestive heart failure, pneumonia, patient satisfaction, and surgical care;
- Implementation of standardized evaluation of personnel involved in significant medical events;
- Creation of core curriculum for healthcare providers in patient safety;
- Standardization of discussion points with patients regarding risks of chemotherapy;
- Development of Moderate Sedation staff education module;
- Development of Central Line staff education module;
- Development of standardized "treatment refusal" form;
- Standardization of "fall risk assessment" tool;

MEDICAL MALPRACTICE (HOSPITALS) [Continued]

- Development of standardized process for determining fetal viability;
- Development of Risk Management Handbook;
- System-wide review of practices for fetal monitoring during procedures and development of guidelines for the monitoring of pregnant patients during procedures;
- System-wide review related to the “fast-tracking” of financial approvals for patients with urgent needs; and
- Quarterly review of risk reduction strategies and procedures.

MEDICAL MALPRACTICE (NON-HOSPITALS)

The Medical Malpractice (Non-Hospitals) sub-committee was established on June 30, 2011, with the purpose to assess adequacy of best practices to limit liability in Medical Malpractice Emergency Medical Services currently practiced, thereby reducing costly exposures and suggest best practices in Medical Malpractice Emergency Medical Services that support LERC goals. Two ways the sub-committee has furthered this purpose have been to review actual County case studies which had a negative impact to the County that could have potentially been avoided if best practices had been implemented, and review Corrective Action Plans and Summary Corrective Action Plans.

Three topics that have been discussed by the sub-committee include:

1. Review of high risk areas within each applicable County department
 - a. Sheriff discussed inmate medical services scheduling issues between Health Services and Sheriff.
 - b. Sheriff and Probation discussed access to higher levels of care which include issues on transportation, delay of care, and what should be done when hospitals are closed.
 - c. Fire’s high-risk area will concentrate on stroke/heart attack;
 - d. Mental Health’s high-risk area will concentrate on suicide;
 - e. Public Health’s high-risk area will concentrate on medication errors and misdiagnosis; and
 - f. Probation’s high-risk area will concentrate on children with medical conditions, both at admissions and while in custody.
2. Review of Patient Safety Organizations

The sub-committee discussed the Patient Safety Network (PSN) system and all of the benefits of having such a system in place for all departments that provide medical services, and will be developing a proposal to expand the use of the system to all appropriate departments.

MEDICAL MALPRACTICE (NON-HOSPITALS) [Continued]

3. Review of Current Risk Management Structures in Each Representative's Applicable Department

The sub-committee briefly discussed various types of risk management structures. All of the departments who are members of the sub-committee appeared to have reliable risk management structures which adequately address medical malpractice issues. Fire's risk management system and their medical section could have a more cohesive merger of the two processes. This could be extremely beneficial to all parties involved, not only for cost savings but preventive measures including patient safety issues and solving any disconnect between risk management and medical. This issue is being further addressed by the sub-committee.

All three topics are still being discussed and the sub-committee will continue do to so until viable options and/or solutions are recommended.

TRAINING AND COMMUNICATION

The Training and Communication sub-committee is tasked with evaluating the current training offerings and communication channels, and content that can support LERC-related objectives. Because of the decentralized nature and disparate exposures faced by departments, training offerings and communication content for mitigating exposures, such as vehicle liability and employment practices, vary greatly.

For training, the initial focus is to determine the current status of offerings. This sub-committee polled other LERC sub-committees to determine what training programs and communications are presently in place, creating a matrix to map current offerings by LERC-related objectives (e.g., "What training does your department have available to reduce vehicle liability claims?"). At this time, the polling is not complete; however, once all sub-committees have responded, this sub-committee will address any identified gaps and recommend improvements.

For communication, the initial focus is to determine the ideal communication content and channel for best practices, lessons learned, and general information pieces that can be used by managers and employees in furtherance of LERC-related initiatives.

To that end, existing Countywide and department-specific communication channels, such as web portals and e-mail newsletters, are being reviewed and evaluated. For content, this sub-committee reviewed and evaluated best communication practices from the private sector and is also looking internally at existing best practices (e.g., Risk Management Coordinator quarterly meetings) to determine what can be co-opted for LERC-related communications.

Finally, this sub-committee is working with DHR to evaluate if certain behaviors (e.g., promoting safe work practices, or reporting conditions or employee behavior that can cause potential liability) can be built into non-MAPP job descriptions to reinforce principles learned in training.

Provide Updated Training on New Changes in Laws and Policies for Each Appropriate Department to Implement

Training on new changes in laws and policies is provided by the CEO, County Counsel, DHR, and other departments.

Some of the training completed in the last year for Countywide audiences, includes:

- Four CEO-sponsored Risk Management Coordinators training sessions addressing a wide range of risk management issues, including risk management in the County of Los Angeles, hazard communication training demonstration, various LERC updates, Cal/OSHA inspection procedures, corrective action plans (CAPs) and summary corrective action plans (SCAPs), CAP and SCAP applicability notices, office ergonomics, facility evaluations, vehicle liability and loss control best practices, government claims processing – procedures and practice, loss control and prevention self-assessments, and other subjects;
- Five CEO-sponsored Loss Control and Prevention training sessions;
- The *Introduction to Occupational Safety and Health* series presented three times for 82 people.
- Four CEO-sponsored Return-to-Work Seminars addressing a variety of topics including, but not limited to, Americans with Disabilities Act (ADA) and Fair Employment and Housing Act (FEHA), workers' compensation/return-to-work updates, medical management overview, compliance with State and Federal disability laws, and short-term and long-term disability benefits. A total of 412 participants from various departments attended.
- Three CEO-sponsored *Return-to-Work 101* training sessions consisting of eight classes per session for new return-to-work coordinators, addressing a variety of topics, including, but not limited to, workers' compensation injury reporting, interactive processes, FEHA, medical separations, Family Medical Leave Act (FMLA)/California Family Rights Act (CFRA), and short-term and long-term disability. A total of 134 attendees were trained.
- County Counsel, in collaboration with CEO, provided 12 training sessions for the workers' compensation third party administrators;
- Legal Exposure Reduction Americans with Disabilities Act/Performance Management training was provided at 39 classes for 2,272 participants.
- Supervision and Performance Management training was provided at 15 classes for 308 participants.
- Effective Discipline training was provided at 16 classes for 383 participants.
- Coaching for Performance Improvement training was provided at 12 classes for 213 participants.
- Liebert Cassidy Whitmore presented Fair Labor Standards Act/Overtime Training at 87 classes for 6,180 participants.

Additional training was provided on a department-by-department basis.

Assess the Efficacy of Corrective Action Plans, Review Management Training and Implementation of County Policies, Review Lessons Learned, Discuss Areas of Potential Exposure, and Develop and Implement Specific Strategies Calculated to Prevent Future Claims and Lawsuits

Since establishing the requirement that the CEO approves all CAPs before they are submitted to the Claims Board and/or Board of Supervisors, there has been a significant improvement in both the quality and relevance of CAPs.

In support of LERC goals, the LERC Training and Communication sub-committee is reviewing options for more effectively sharing the “lessons learned” contained in CAPs. Currently, CAPs are redacted and summarized, and presented quarterly at the Risk Management Coordinators meeting; broader dissemination is required.

In the last year, significant issues identified in CAPs resulted in the development of a Countywide CAP document. The process for implementing Countywide corrective actions is being fine-tuned, as they are developed by enterprise departments such as CEO, DHR, and Auditor-Controller. The combination of Countywide CAPs and effectively disseminated departmental CAPs will both heighten awareness of LERC-related exposures and provide tools for mitigating them.

Risk Management Information System

A task force composed of CEO Risk Management Branch, CEO Information Technology Services, and County Counsel was created to evaluate alternative structures for liability and workers’ compensation claims administration, and the provision of risk management data to departments. The task force’s original model would have transferred claims management to the data systems of the TPAs. Claims payments through TPA trust accounts was also explored. Under this model, the County would procure a data aggregation system which would accumulate data from the TPAs, aggregate it, and produce comprehensive reports which would include dashboards as well as ad hoc reporting capability. After thorough review, it was determined that this model would not be effective in part due to Auditor-Controller concerns regarding payment security and County Counsel concerns regarding confidentiality and attorney/client privilege.

At present, the task force is evaluating whether the matter management system procured as part of the e-billing system by County Counsel can effectively meet the County’s needs for liability claims administration and risk management information dissemination.

A number of Risk Management Information System (RMIS) enhancements positively impacted the management of the County’s litigation and claim processes:

- Implementation of the Federally-required Medicare Secondary Payer reporting program enhancement;
- Implementation of the County Counsel e-billing enhancement and software; and
- Acquisition of a dedicated server to provide department access to enhanced liability claims reports through the enterprise ORBIT/Cognos application.

Risk Management Information System (Continued)

A number of RMIS enhancements are currently in progress to provide County Counsel, CEO's liability claim TPAs, and CEO staff better tools to effectively manage the County's tort liability claims/litigation processes, including:

- Implementation of a system-wide Microsoft.NET architecture which will enhance system productivity, performance, and reliability; and
- Enhanced of standard liability claims reports to Risk Management Coordinators through the enterprise ORBIT/Cognos application and development of standard workers' compensation claims reports to be launched in January 2012.

The CEO will also begin the evaluation and solicitation process relating to the RMIS contract.

Cognos Claims and Litigation Data

The CEO and County Counsel will continue to develop specific liability reports and performance dashboards utilizing the Cognos application. Authorized departmental risk management staff will be granted access to approved RMIS data.

Electronic Bill Review System

CT Tymetrix (CT) was identified as the highest scoring Proposer on September 16, 2010. Thereafter, representatives from County Counsel, CEO, Chief Information Office, and Internal Services Department commenced contract discussions with CT. The extensive discussions resulted in favorable terms and pricing for the County. The implementation of the CT E-Billing System (T360) commenced in May 2011. By September 2011, the system design was completed and 110 contract law firms were uploaded to the system. In addition, all litigated cases from RMIS were reproduced on T360. By October 2011, a total of 140 users, including County Counsel attorneys and TPA staff, were trained on T360 and all contract law firms began submitting invoices. Transfer feeds between RMIS and T360 relating to cases, invoices, and budgets are currently being implemented. It is projected that these feeds should be completed by the end of December 2011, and that the T360 E-Billing System will be fully operational at that time. The new system will be linked to the current RMIS database. However, T360 has its own matter management functionality which may be converted to County use at a pre-negotiated nominal fee.

COUNTY OF LOS ANGELES
LEGAL EXPOSURE REDUCTION COMMITTEE
ROSTER

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